



MARYLAND Department of Health

Public Health Preparedness and Situational Awareness Report: #2020:40

Reporting for the week ending 10/03/20 (MMWR Week #40)

October 9th, 2020

CURRENT HOMELAND SECURITY THREAT LEVELS

National: No Active Alerts

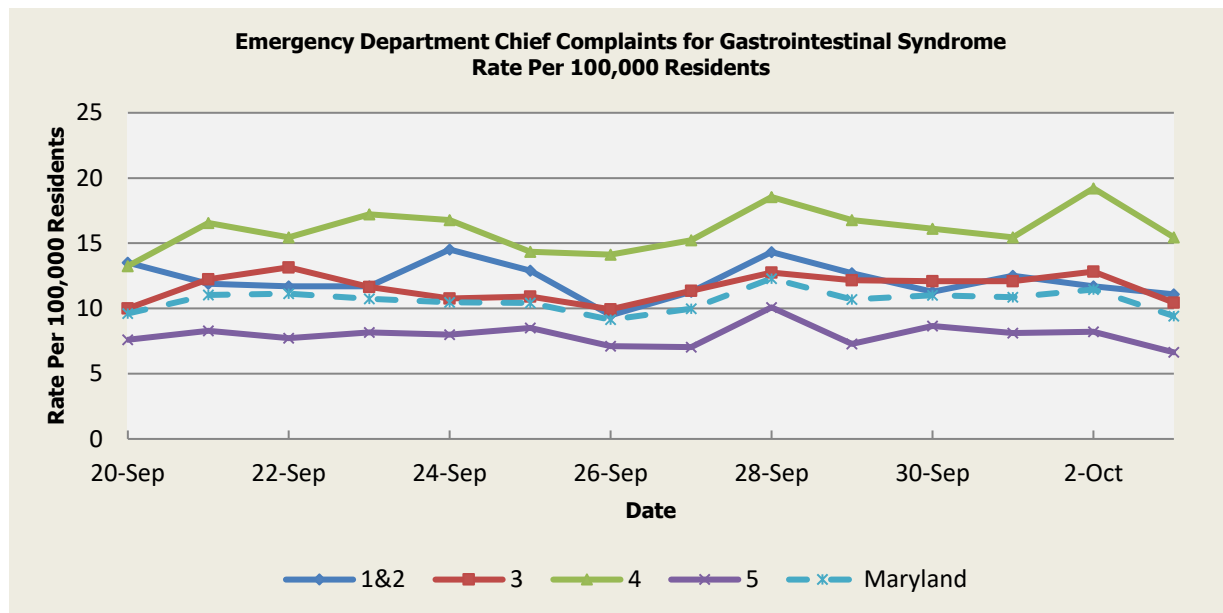
Maryland: **ENHANCED** (MEMA status)

SYNDROMIC SURVEILLANCE REPORTS

ESSENCE (Electronic Surveillance System for the Early Notification of Community-based Epidemics): Graphical representation is provided for all syndromes (excluding the “Other” category; see Appendix 1) by Health and Medical Regions (See Appendix 2). Emergency department chief complaint data is presented as rates per 100,000 residents using data from the 2010 census. Electronic Surveillance System for the Early Notification of Community-Based Epidemics (ESSENCE). Baltimore, MD: Maryland Department of Health; 2019.

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Gastrointestinal Syndrome



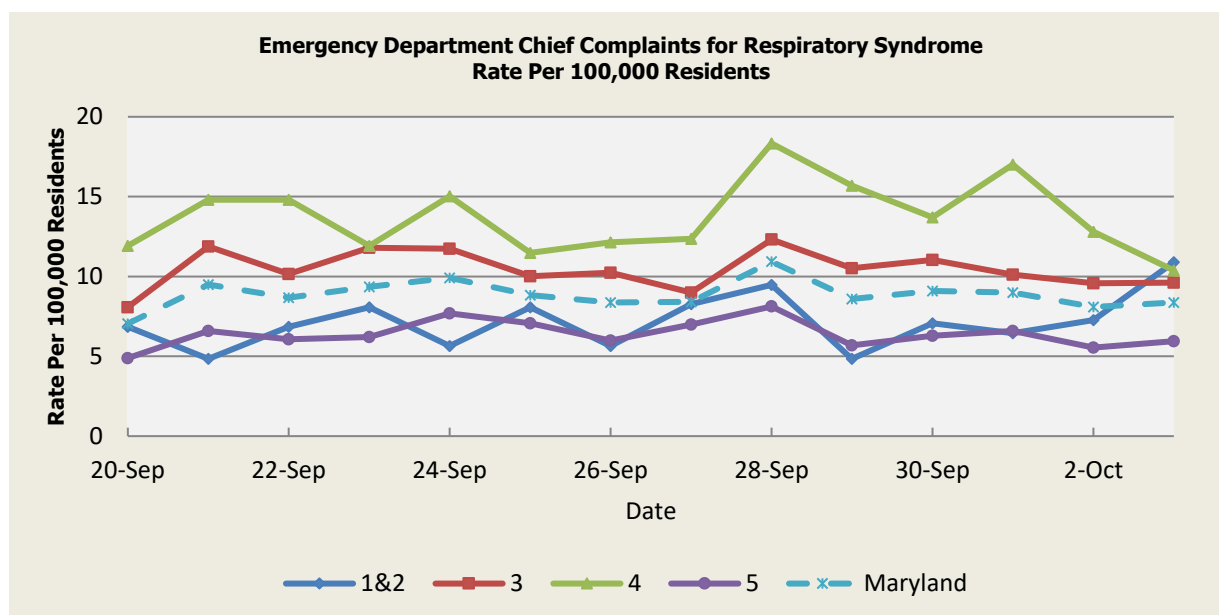
There were no Gastrointestinal Syndrome outbreaks reported this week.

Gastrointestinal Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	13.23	14.89	15.86	10.16	13.01
Median Rate*	13.11	14.76	15.46	10.13	12.95

** Per 100,000 Residents*

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Respiratory Syndrome



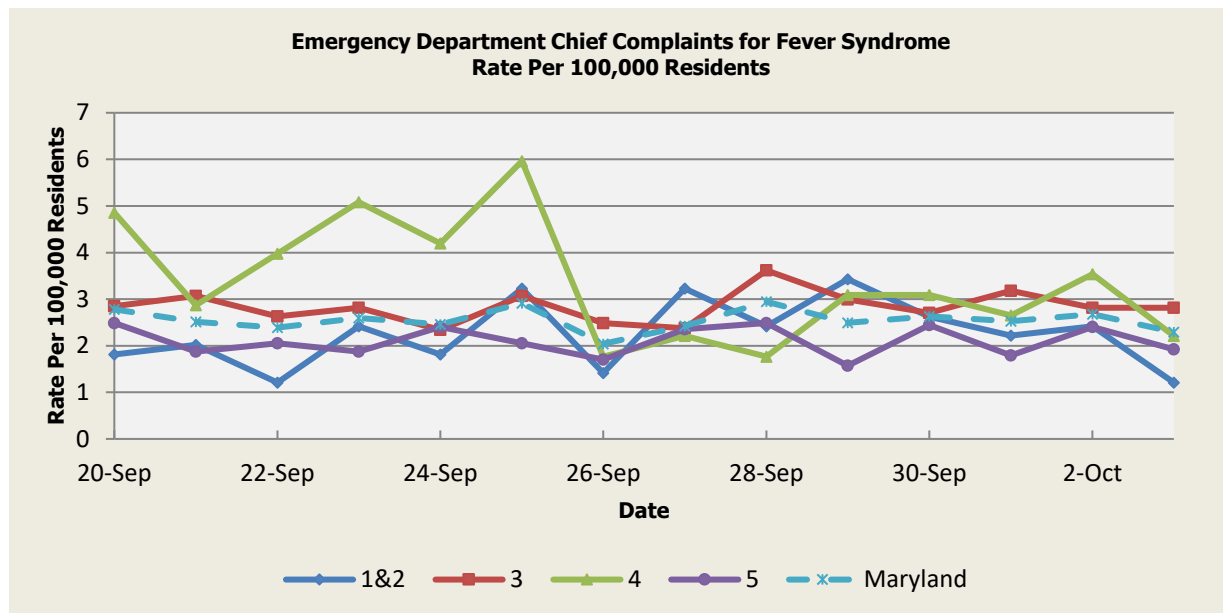
There were forty-five (45) Respiratory Syndrome outbreaks reported this week: Eight (8) outbreaks of COVID-19 in Assisted Living Facilities (Regions 3,5), one (1) outbreak of COVID-19 in a Treatment Facility for Children and Adolescents (Region 5), two (2) outbreaks of COVID-19 in Correctional Facilities (Regions 3,5), one (1) outbreak of COVID-19 in a Daycare Center (Region 5), one (1) outbreak of COVID-19 in a Dialysis Center (Region 5), seven (7) outbreaks of COVID-19 in Group Homes (Regions 3,4,5), one (1) outbreak of COVID-19 in a Hospice Facility (Region 4), one (1) outbreak of COVID-19 in a Hospital (Region 3), one (1) outbreak of COVID-19 in an Independent Living Facility (Region 3), eleven (11) outbreaks of COVID-19 in Nursing homes (Regions 3,4,5), one (1) outbreak of COVID-19 in a Residential Recovery Facility (Region 5), eight (8) outbreaks of COVID-19 in Schools (Regions 1&2, 3), two (2) outbreaks of COVID-19 in Workplaces (Region 4).

Respiratory Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	12.46	14.78	15.17	10.02	12.79
Median Rate*	12.10	14.14	14.35	9.65	12.25

* Per 100,000 Residents

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Fever Syndrome



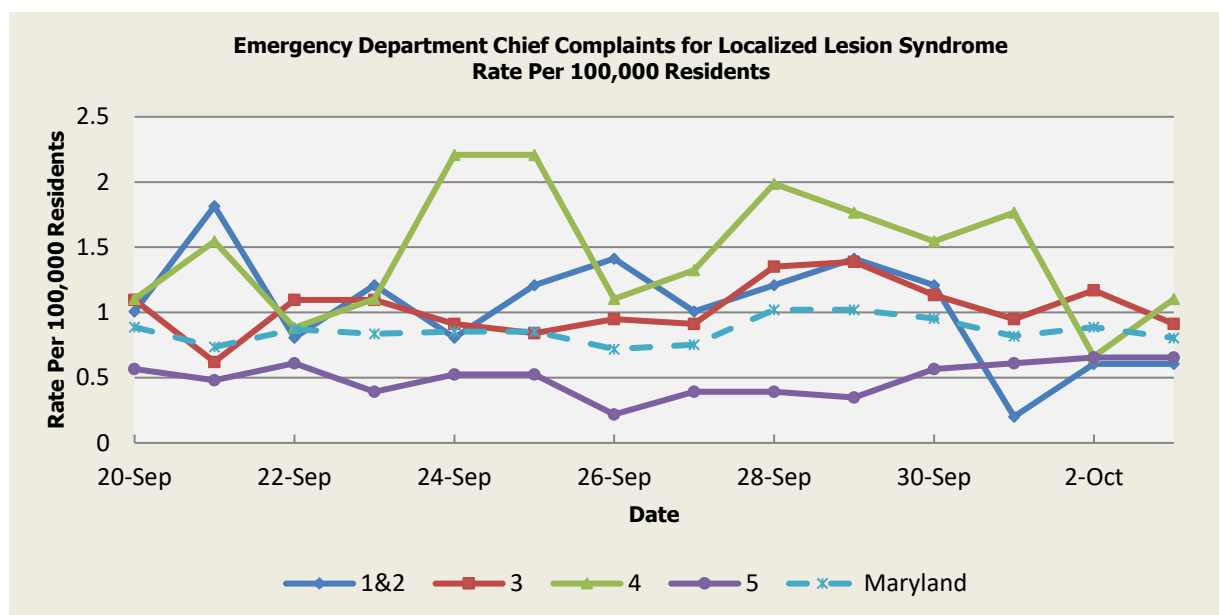
There were no Fever Syndrome outbreaks reported this week.

Fever Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	3.06	3.91	4.14	3.04	3.52
Median Rate*	3.02	3.76	3.97	2.92	3.40

**Per 100,000 Residents*

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Localized Lesion Syndrome



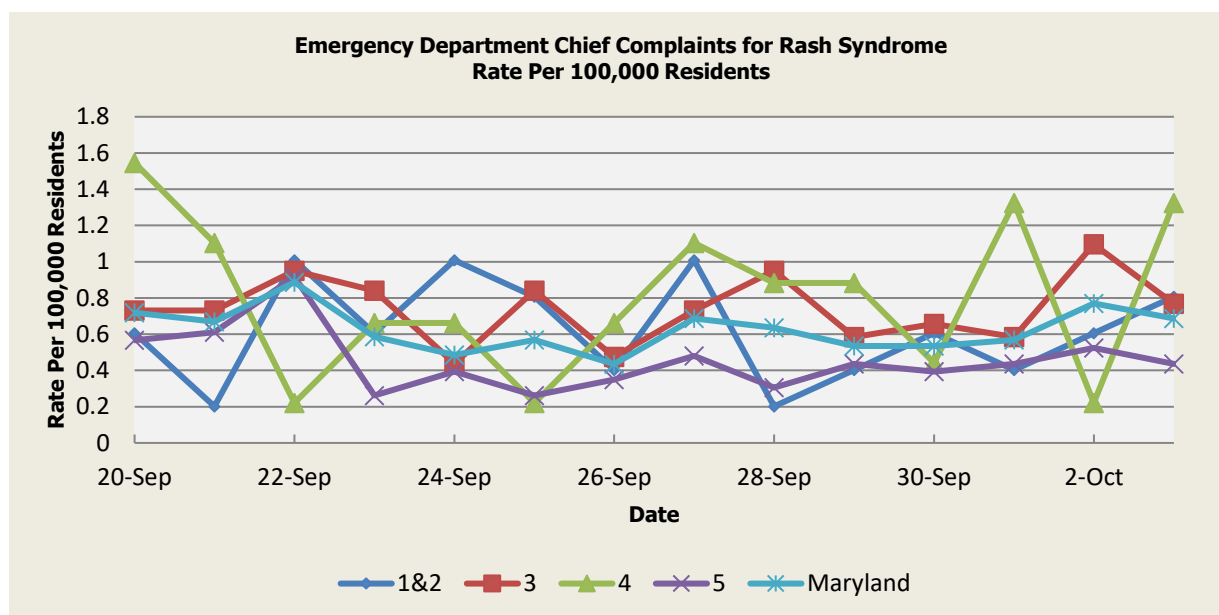
There were no Localized Lesion Syndrome outbreaks reported this week.

Localized Lesion Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	1.16	1.72	1.99	0.88	1.37
Median Rate*	1.01	1.64	1.99	0.83	1.32

* Per 100,000 Residents

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Rash Syndrome



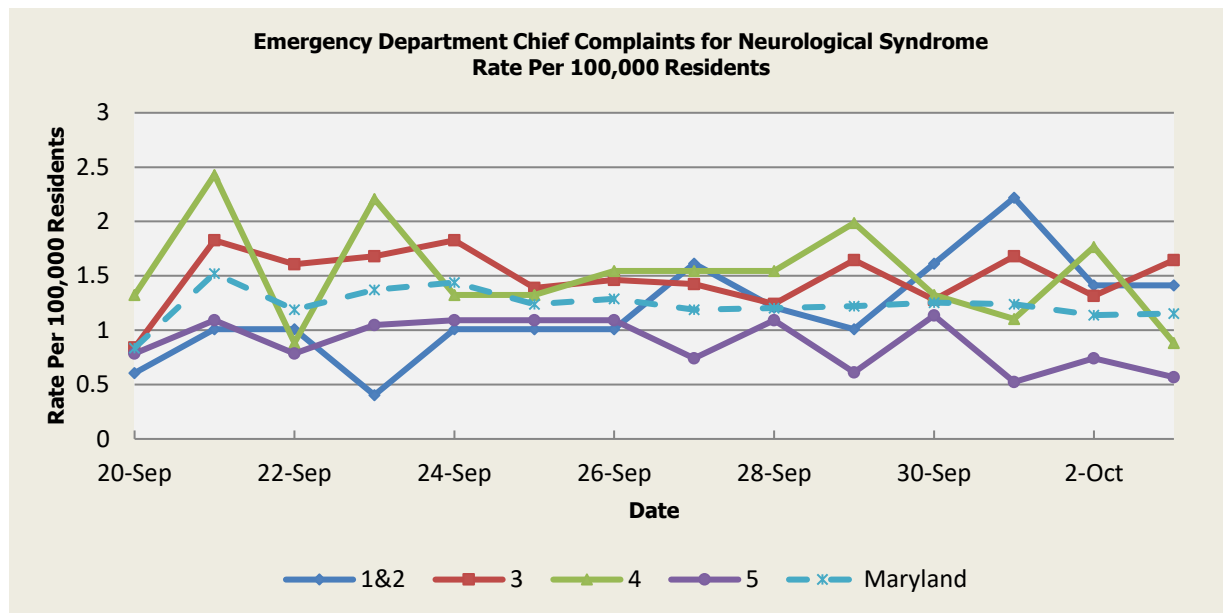
There were one (1) Rash Syndrome outbreaks reported this week: one (1) outbreak of Scabies in a Nursing Home (Region 5)

Rash Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	1.21	1.61	1.70	0.94	1.32
Median Rate*	1.21	1.57	1.55	0.92	1.29

* Per 100,000 Residents

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Neurological Syndrome



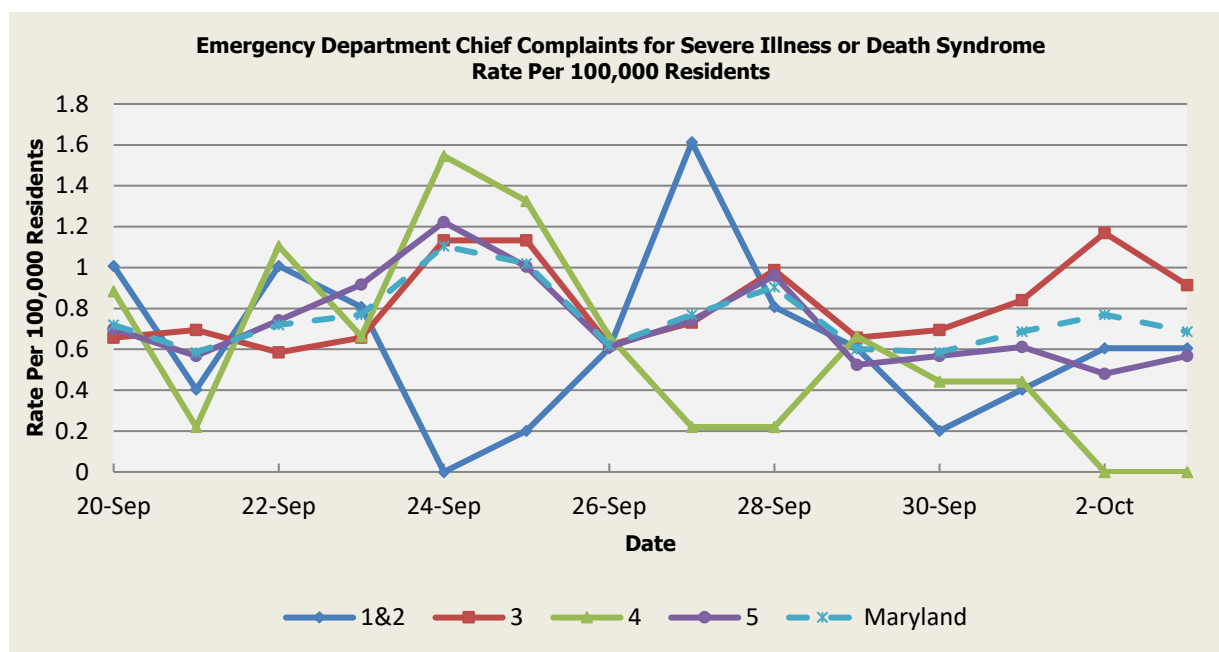
There were no Neurological Syndrome outbreaks reported this week.

Neurological Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.82	1.00	0.92	0.64	0.84
Median Rate*	0.81	0.95	0.88	0.61	0.80

* Per 100,000 Residents

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Severe Illness or Death Syndrome



There were no Severe Illness or Death Syndrome outbreaks reported this week.

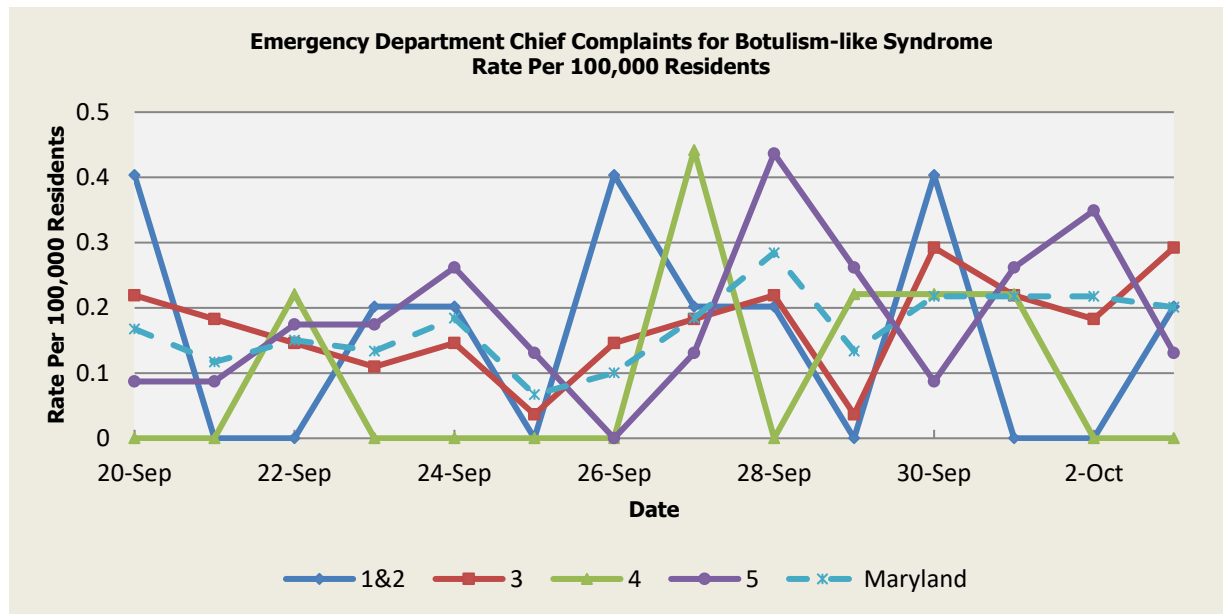
Severe Illness or Death Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.65	0.88	0.84	0.54	0.73
Median Rate*	0.60	0.84	0.88	0.52	0.70

* Per 100,000 Residents

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SYNDROMES RELATED TO CATEGORY A AGENTS

Botulism-like Syndrome



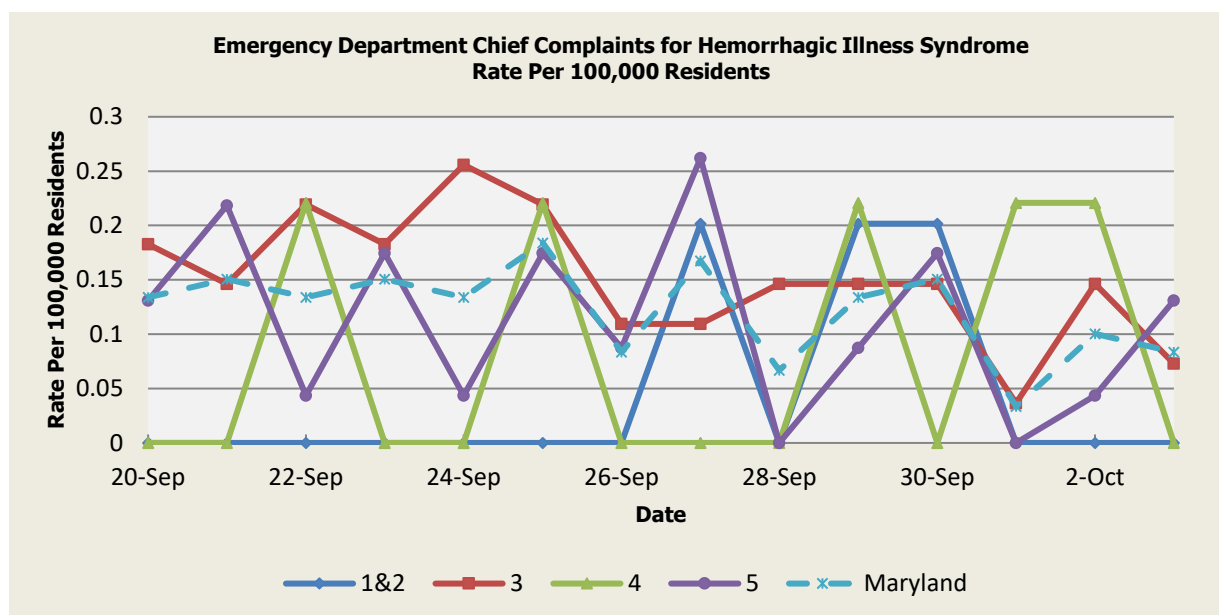
There was an appreciable increase above baseline in the rate of ED visits for Botulism-like Syndrome on, 9/20 (Region 1&2), 9/22 (Region 4), 9/23 (Regions 1&2), 9/24 (Regions 1&2,5), 9/26 (Regions 1&2), 9/27 (Regions 1&2,4), 9/28 (Regions 1&2,5), 9/29 (Regions 4,5), 9/30 (Regions 1&2,3,4), 10/1 (Regions 4,5), 10/2 (Region 5), 10/3 (Regions 1&2,3). These increases are not known to be associated with any outbreaks.

Botulism-like Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.08	0.13	0.06	0.09	0.10
Median Rate*	0.00	0.11	0.00	0.09	0.08

* Per 100,000 Residents

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Hemorrhagic Illness Syndrome



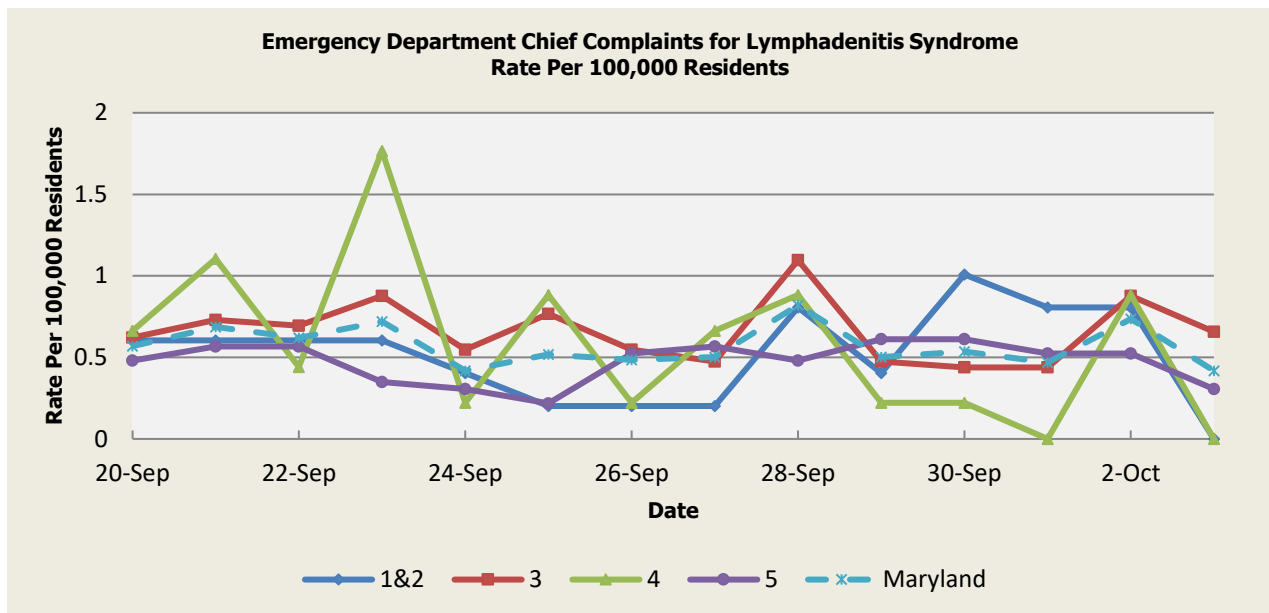
There was an appreciable increase above baseline in the rate of ED visits for Hemorrhagic Illness Syndrome on, 9/22 (Region 4), 9/25 (Region 4), 9/27 (Regions 1&2), 9/29 (Regions 1&2,4), 9/30 (Regions 1&2), 10/1 (Region 4), 10/2 (Region 4). These increases are not known to be associated with any outbreaks.

Hemorrhagic Illness Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.05	0.17	0.04	0.15	0.14
Median Rate*	0.00	0.11	0.00	0.09	0.10

* Per 100,000 Residents

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Lymphadenitis Syndrome



There was an appreciable increase above baseline in the rate of ED visits for Lymphadenitis Syndrome on, 9/21 (Region 4), 9/23 (Region), 9/25 *Region 4), 9/28 (Regions 1&2,4), 9/30 (Regions 1&2), 10/1 (Regions 1&2), 10/2 (Regions 1&2,4). These increases are not known to be associated with any outbreaks.

Lymphadenitis Syndrome Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.39	0.60	0.41	0.40	0.49
Median Rate*	0.40	0.55	0.44	0.35	0.45

* Per 100,000 Residents

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MARYLAND REPORTABLE DISEASE SURVEILLANCE

Coronavirus Disease 2019 (COVID-19) Situation Summary

On March 5th, 2020, the Maryland Department of Health announced the first cases of coronavirus disease 2019 (abbreviated COVID-19) in the State of Maryland.

Confirmed COVID-19 Case Counts in Maryland by County (As of October 9th, 2020)

County	Number of Confirmed Cases
Allegany	506
Anne Arundel	10,655
Baltimore City	16,354
Baltimore County	18,792
Calvert	1,047
Caroline	677
Carroll	2,051
Cecil	1,148
Charles	2,904
Dorchester	625
Frederick	4,297
Garrett	76
Harford	3,227
Howard	5,357
Kent	318
Montgomery	23,403
Prince George's	30,502
Queen Anne's	691
Somerset	335
St. Mary's	1,361
Talbot	583
Washington	1,955
Wicomico	2,175
Worcester	1,120
Total	130,159

The most up-to-date information may be found on the Maryland Department of Health website at <https://coronavirus.maryland.gov>.

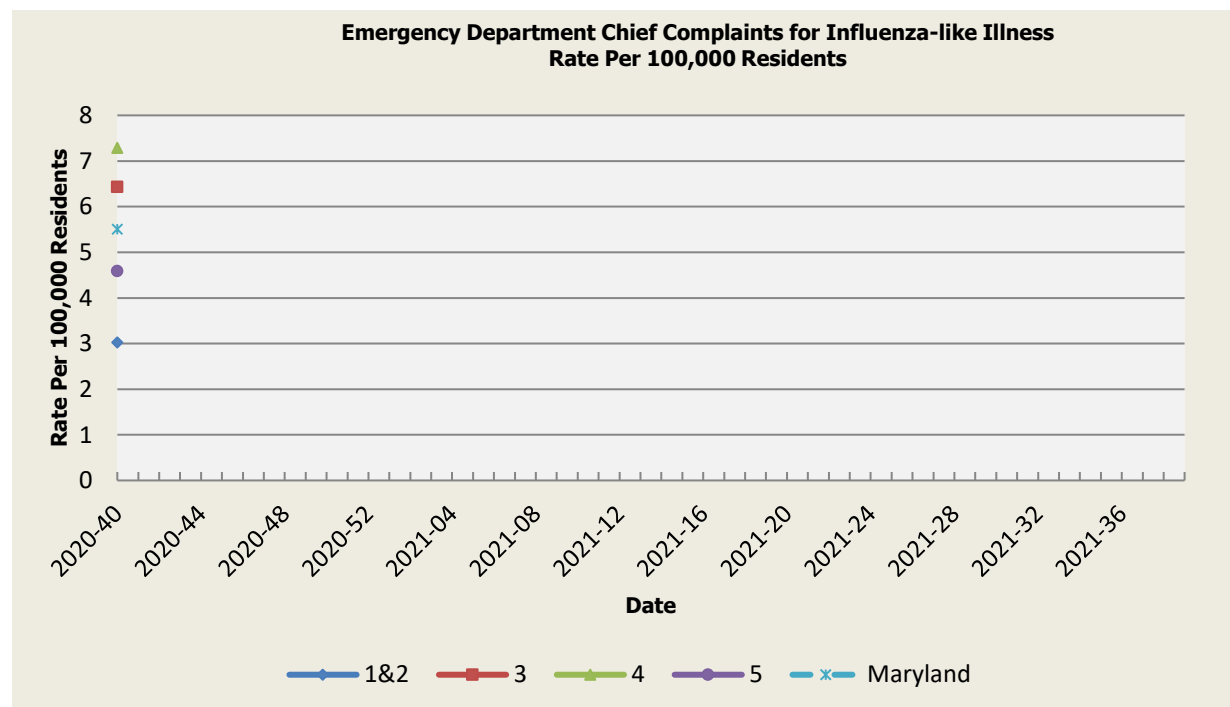
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SYNDROMIC INFLUENZA SURVEILLANCE

Seasonal Influenza reporting occurs from MMWR Week 40 through MMWR Week 20 (October 2020 through May 2021). Due to the COVID-19 pandemic, influenza reporting will be extended to the beginning of the 2021-2022 reporting season (MMWR Week 40/Week Ending October 9, 2021).

Seasonal Influenza activity for Week 40 was: Minimal

Influenza-like Illness

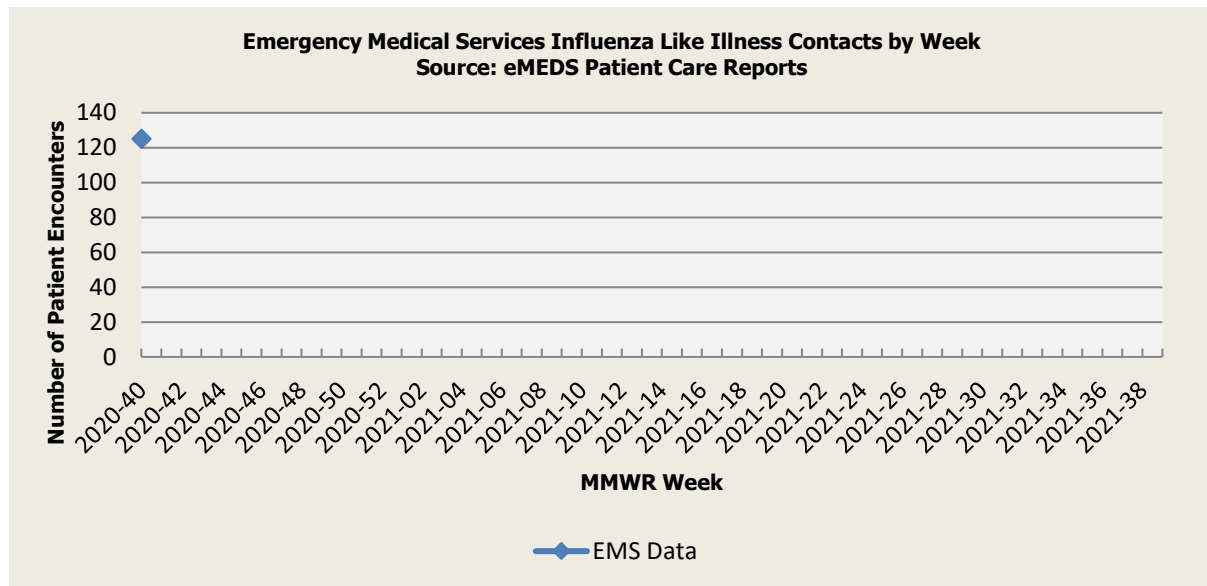


Influenza-like Illness Baseline Data Week 1 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	10.31	14.14	13.45	11.94	12.93
Median Rate*	7.66	10.41	9.50	8.86	9.55

* Per 100,000 Residents

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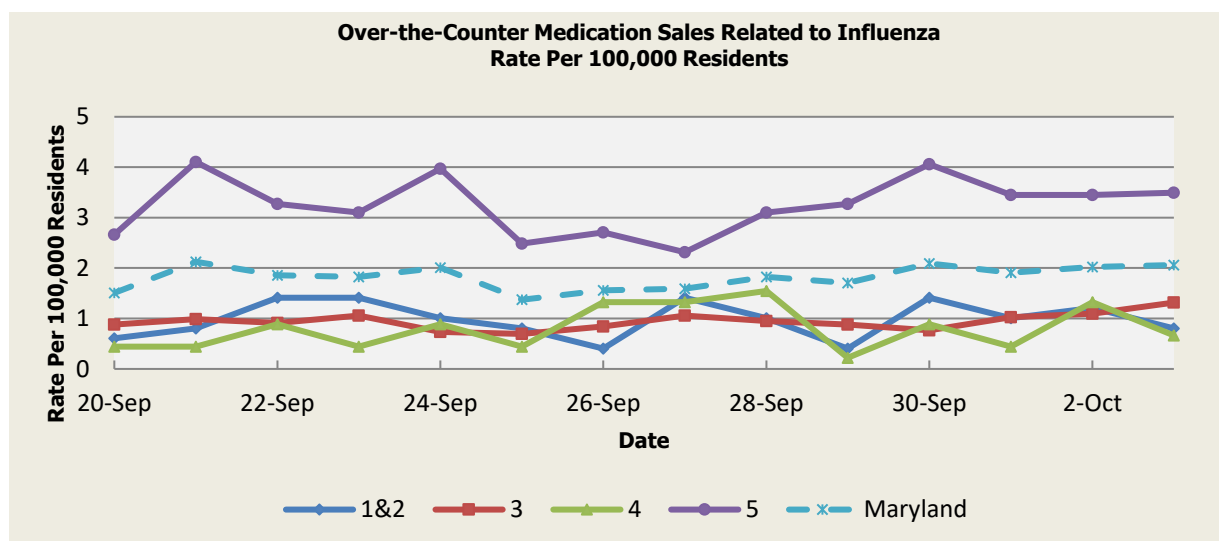
Influenza-like Illness Contacts by Week



Disclaimer on eMEDS flu related data: These data are based on EMS Pre-hospital care reports where the EMS provider has selected “flu like illness” as a primary or secondary impression of a patient’s illness. This impression is solely based on the signs and symptoms seen by the provider, not on any diagnostic tests. Since these numbers do not include all primary or secondary impressions that may be seen with influenza the actual numbers may be low. These data are reported for trending purposes only.

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Over-the-Counter Influenza-Related Medication Sales



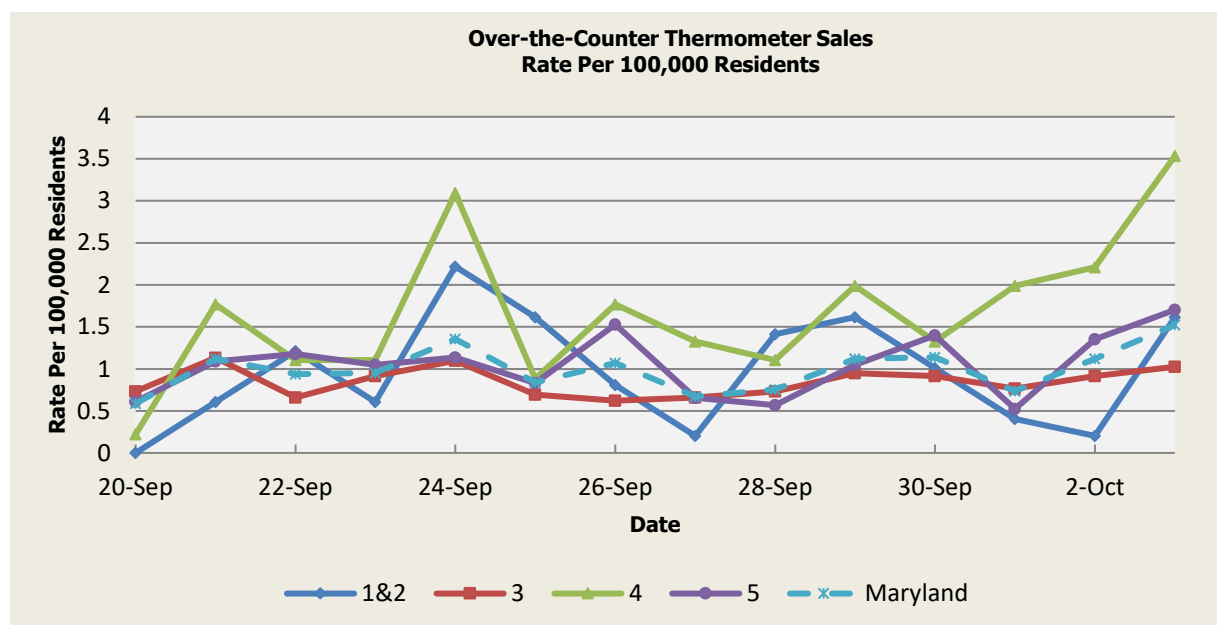
There was no appreciable increase above baseline in the rate of OTC Medication Sales during this reporting period.

OTC Medication Sales Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	3.29	4.20	2.57	7.53	5.28
Median Rate*	2.62	3.25	2.21	6.77	4.50

* Per 100,000 Residents

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Over-the-Counter Thermometer Sales



There was no appreciable increase above baseline in the rate of OTC Thermometer Sales during this reporting period.

Thermometer Sales Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	2.74	2.60	2.11	3.45	2.90
Median Rate*	2.42	2.56	1.99	3.45	2.93

* Per 100,000 Residents

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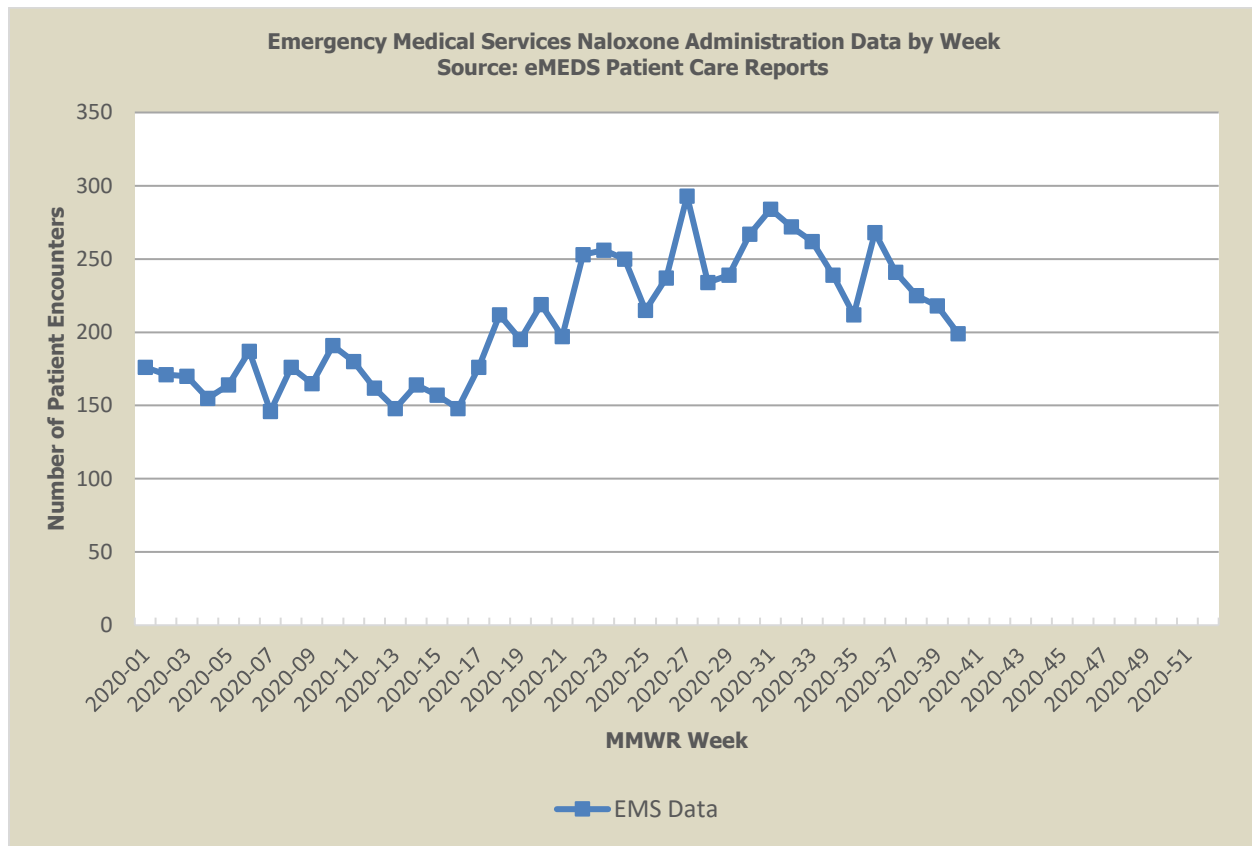
SYNDROMIC OVERDOSE SURVEILLANCE

The purpose of this section is to characterize non-fatal ED visit trends for acute unintentional overdose by Heroin, Opioid or Unspecified substance among Maryland residents captured by ESSENCE data, including chief complaint and discharge diagnosis. ED visits that are identified as unintentional overdose by Heroin, Opioid or Unspecified substance include those with medical and non-medical use of a prescription Opioid or where the substance is not specified, given evidence that most fatal overdoses are Opioid-related.

In preparation for the release of new ESSENCE queries for identifying heroin, opioid and all drug overdoses, please note that we have removed the data chart showing unintentional overdose rates by heroin, opioid, or unspecified substances. These new data, when available, will be presented below.

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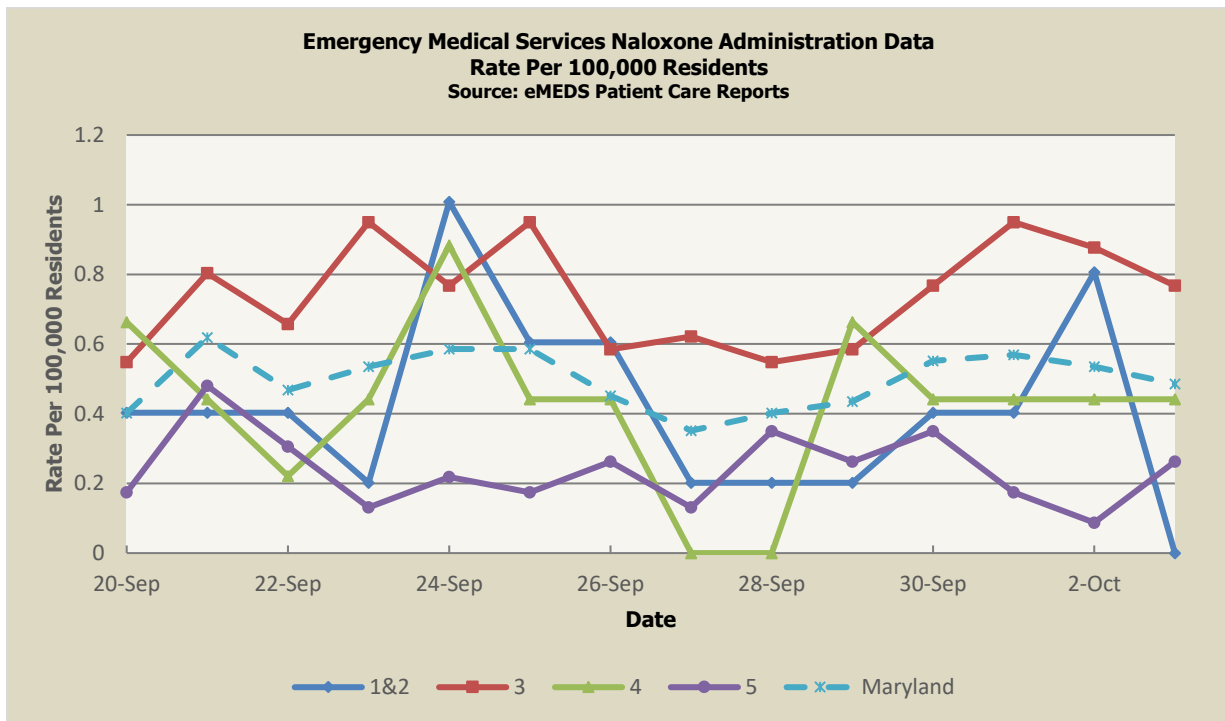
Naloxone Administration Data by Week



Disclaimer on eMEDS naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

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Naloxone Administration Data



Disclaimer on eMEDS Naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.

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PANDEMIC INFLUENZA UPDATE / AVIAN INFLUENZA-RELATED REPORTS

WHO update: The current WHO phase of pandemic alert for avian influenza is ALERT. Currently, the avian influenza H5N1 virus continues to circulate in poultry in some countries, especially in Asia and northeast Africa. This virus continues to cause sporadic human infections with some instances of limited human-to-human transmission among very close contacts. There has been no sustained human-to-human or community-level transmission identified thus far.

Influenza A (H7N9) is one of a subgroup of influenza viruses that normally circulate among birds. Until recently, this virus had not been seen in people. However, human infections have now been detected. Presently, there is limited information about the scope of the disease the virus causes and about the source of exposure. The disease is of concern because most patients have been severely ill. There is no indication thus far that it can be transmitted between people, but both animal-to-human and human-to-human routes of transmission are being actively investigated.

Alert phase: This is the phase when influenza caused by a new subtype has been identified in humans. Increased vigilance and careful risk assessment, at local, national, and global levels are characteristic of this phase. If the risk assessments indicate that the new virus is not developing into a pandemic strain, a de-escalation of activities towards those in the interpandemic phase may occur. As of October 9th, 2020, the WHO-confirmed global total (2003-2020) of human cases of H5N1 avian influenza virus infection stands at 861, of which 455 have been fatal. Thus, the case fatality rate for human H5N1 is approximately 53%.

AVIAN INFLUENZA

AVIAN INFLUENZA (65) (RUSSIA), 6 October 2020, Information received on [and dated] 28 Sep 2020 from Dr Nikolay Vlasov, deputy head, Federal Service for Veterinary and Phytosanitary Surveillance, Ministry of Agriculture, Moscow, Russia. Read More: <https://promedmail.org/promed-post/?id=7840560>

HUMAN AVIAN INFLUENZA

AVIAN INFLUENZA, HUMAN (05): CHINA, 4 October 2020, Chinese officials report a human H9N2 avian influenza case in a 4-year-old girl from Guangdong province. The child was hospitalized in August 2020 with mild symptoms and has fully recovered. Read More: <https://promedmail.org/promed-post/?id=7835005>

NATIONAL DISEASE REPORTS

INVASIVE MOSQUITO (CALIFORNIA), 5 October 9, 2020 2020, The Mosquito and Vector Management District of Santa Barbara County has confirmed the presence of the non-native *Aedes aegypti* mosquito in Santa Barbara County. Read More:

<https://promedmail.org/promed-post/?id=7836592>

BOTULISM (RHODE ISLAND), 4 October 2020, The Rhode Island Department of Health is warning of a botulism risk with products sold by a Cranston store. Read More:

<https://promedmail.org/promed-post/?id=7835366>

EASTERN EQUINE ENCEPHALITIS (MICHIGAN), 4 October 2020, The state says a Montcalm County resident has died from eastern equine encephalitis [EEE]. Officials did not release additional details about the death on Friday [2 Oct 2020]. Read More:

<https://promedmail.org/promed-post/?id=7834736>

ALASKAPOX: USA (ALASKA), 4 October 2020, In August [2020], a Fairbanks resident visited her doctor's office with a mysterious gray lesion on her left upper arm, along with shoulder pain, fatigue, and a fever. Read More: <https://promedmail.org/promed-post/?id=7833951>

JAMESTOWN CANYON VIRUS (NEW HAMPSHIRE), 3 October 2020, The New Hampshire Department of Health and Human Services announced Friday [2 Oct 2020] that an adult from Epsom has tested positive for Jamestown Canyon virus. Read More:

<https://promedmail.org/promed-post/?id=7834021>

WEST NILE VIRUS (MULTISTATE), 3 October 2020, To date [30 Sep 2020], California officials have reported a total of 91 West Nile virus cases in people statewide. Of those, Los Angeles County Public Health said it has identified 27 local cases. Read More:

<https://promedmail.org/promed-post/?id=7832090>

RABIES (MULTISTATE), 3 October 2020, According to White County Environmental Health, on Tuesday [1 Sep 2020], a dog owner went outside when he heard some noise on his porch and discovered his dog fighting with a raccoon. Read More:

<https://promedmail.org/promed-post/?id=7829604>

INTERNATIONAL DISEASE REPORTS

CORONAVIRUS DISEASE 2019 UPDATE (428): (GLOBAL), 7 October 2020, The USA and India are still the most severely affected countries in terms of cumulative case counts and daily new case confirmations, with India in the 2nd position in terms of cumulative case counts and dominating in terms of newly reported cases. Read More: <https://promedmail.org/promed-post/?id=7842239>

ANTHRAX (RUSSIA), 7 October 2020, A recent outbreak of anthrax disease, severely affecting reindeer herds in Siberia, has been reportedly associated with the presence of infected

carcasses or spores released from the active layer over permafrost, which is thawing and thickening at increasing rates, thus underlying the re-emerging nature of this pathogen in the Arctic region because of warming temperatures. Read More: <https://promedmail.org/promed-post/?id=7843531>

BOTULISM (ITALY), 7 October 2020, More than 30 people have needed hospital treatment in Italy for suspected botulism intoxication. Read More: <https://promedmail.org/promed-post/?id=7840852>

TOXIC SPILL (RUSSIA), 6 October 2020, Surfers raised alarm after once-pristine waters caused major problems with eyesight, fevers, and throat aches. Read More: <https://promedmail.org/promed-post/?id=7839501>

TICK-BORNE ENCEPHALITIS (DENMARK), 6 October 2020, In the period from June to mid-August 2020, Statens Serum Institut [SSI] detected 3 tickborne encephalitis (TBE) cases in patients who, with great certainty, were bitten by ticks in Tisvilde Hegn and the surrounding areas, but beyond the area where the natural playground is located. Read More: <https://promedmail.org/promed-post/?id=7839459>

WEST NILE VIRUS (22): (CANADA), 5 October 2020, A Lambton County [Southwestern Ontario] resident has tested positive for the West Nile virus, the 1st lab-confirmed human case this year [2020], Lambton Public Health said. Read More: <https://promedmail.org/promed-post/?id=7836514>

HAND, FOOT AND MOUTH DISEASE UPDATE (VIET NAM), 4 October 2020, The Center for Disease Control and Prevention in Ho Chi Minh City said that the city has recorded a total of 6358 hand-foot-mouth infection cases from the beginning of the year [2020], said Dr. Le Hong Nga from the center yesterday [2 Oct 2020]. Read More: <https://promedmail.org/promed-post/?id=7835796>

EBOLA UPDATE (48): (DEMOCRATIC REPUBLIC OF CONGO), 4 October 2020, A new case of Ebola virus disease (EVD) was confirmed on 28 Sep 2020 in the health zone of Makanza. Read More: <https://promedmail.org/promed-post/?id=7835528>

FOODBORNE ILLNESS (EGYPT), 4 October 2020, El Mahmoudeya Central Hospital, located in Egypt's Beheira Governorate, received on Thu 1 Oct 2020 134 people experiencing severe symptoms of food poisoning after eating at a wedding in the village of Ezbet al-Far. Read More: <https://promedmail.org/promed-post/?id=7835378>

CRIMEAN-CONGO HEMORRHAGIC FEVER (INDIA), 4 October 2020, A rare disease known as Congo fever has claimed its 1st victims in India. Read More: <https://promedmail.org/promed-post/?id=7834726>

RESPIRATORY SYNCYTIAL VIRUS (BELGIUM), 3 October 2020, Respiratory syncytial virus (RSV) is a common cause of severe respiratory illness in young children (less than 5 years old) and older adults (greater than or equal to 65 years old), leading the World Health Organization (WHO) to recommend the implementation of a dedicated surveillance in countries. Read More: <https://promedmail.org/promed-post/?id=7834034>

OTHER RESOURCES AND ARTICLES OF INTEREST

More information concerning Public Health and Emergency Preparedness can be found at the Office of Preparedness and Response website: <http://preparedness.health.maryland.gov/> or follow us on Facebook at www.facebook.com/MarylandOPR.

More data and information on influenza can be found on the MDH website:
<http://phpa.health.maryland.gov/influenza/fluwatch/Pages/Home.aspx>

Please participate in the Maryland Resident Influenza Tracking System (MRITS):
<http://flusurvey.health.maryland.gov>

NOTE: This weekly review is a compilation of data from various surveillance systems, interpreted with a focus on a potential BT event. It is not meant to be inclusive of all epidemiology data available, nor is it meant to imply that every activity reported is a definitive BT event. International reports of outbreaks due to organisms on the CDC Critical Biological Agent list will also be reported. While not "secure", please handle this information in a professional manner. Please feel free to distribute within your organization, as you feel appropriate, to other professional staff involved in emergency preparedness and infection control.

For questions about the content of this review or if you have received this and do not wish to receive these weekly notices, please e-mail us. If you have information that is pertinent to this notification process, please send it to us to be included in the routine report.

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Appendix 1: ESSENCE Syndrome Definitions and Associated Category A Conditions

Syndrome	ESSENCE Definition	Category A Conditions
Botulism-like	(Botulism or (DifficultyFocusing and DifficultySpeaking) or (DifficultySpeaking and DifficultySwallowing) or (DifficultySwallowing and DifficultyFocusing) or DoubleVision or FacialParalysis or GuillainBarre or Ptosis) and not GeneralExclusions	Botulism
Fever	(Chills or (FeverPlus and (Drowsiness or Seizure)) or FeverOnly or SepsisGroup or ViralSyndrome) and not GeneralExclusions	N/A
Gastrointestinal	(AbdominalCramps or AbdominalPainGroup or Diarrhea or FoodPoisoning or Gastroenteritis or GIBleeding or Peritonitis or Vomiting) and not (GeneralExclusions or Gynecological or Obstetric or Reproductive or UrinaryTract)	Anthrax (gastrointestinal)
Hemorrhagic Illness	(FeverOrChills and (AcuteBloodAbnormalitiesGroup or BleedingFromMouth or BleedingGums or GIBleeding or Hematemesis or Hemoptysis or Nosebleed or Petechiae or Purpura)) and not GeneralExclusions	Viral Hemorrhagic Fever
Localized Lesion	(Boils or Bump or Carbuncle or DepressedUlcer or Eschar or Furuncle or InsectBite or SkinAbscess or (SkinSores and not AllOverBody) or SkinUlcer or SpiderBite) and not (GeneralExclusions or Decubitus or Diabetes or StasisUlcer)	Anthrax (cutaneous) Tularemia
Lymphadenitis	(BloodPoisoning or Bubo or CatScratchDisease or SwollenGlands) and not GeneralExclusions	Plague (bubonic)
Neurological	(([Age<75] and AlteredMentalStatus) or (FeverPlus and (Confusion or Drowsiness or Petechiae or StiffNeck)) or Delirium or Encephalitis or Meningitis or UnconsciousGroup) and not GeneralExclusions	N/A
Rash	(ChickenPox or Measles or RashGeneral or Roseola or (Rubella and not Pregnancy) or Shingles or (SkinSores and AllOverBody) or Smallpox) and not GeneralExclusions	Smallpox
Respiratory	(Anthrax or Bronchitis or (ChestPain and [Age<50]) or Cough or Croup or DifficultyBreathing or Hemothorax or Hypoxia or Influenza or Legionnaires or LowerRespiratoryInfection or Pleurisy or Pneumonia or RespiratoryDistress or RespiratoryFailure or RespiratorySyncytialVirus or RibPain or ShortnessOfBreath or Wheezing) and not (GeneralExclusions or Cardiac or (ChestPain and Musculoskeletal) or Hyperventilation or Pneumothorax)	Anthrax (inhalational) Tularemia Plague (pneumonic)
Severe Illness or Death	CardiacArrest or CodeGroup or DeathGroup or (Hypotension and FeverPlus) or RespiratoryArrest or SepsisGroup or Shock	N/A

Appendix 2: Maryland Health and Medical Region Definitions

Health and Medical Region	Counties Reporting to ESSENCE
Regions 1 & 2	Allegany County Frederick County Garrett County Washington County
Region 3	Anne Arundel County Baltimore City Baltimore County Carroll County Harford County Howard County
Region 4	Caroline County Cecil County Dorchester County Kent County Queen Anne's County Somerset County Talbot County Wicomico County Worcester County
Region 5	Calvert County Charles County Montgomery County Prince George's County St. Mary's County

